

SPENCER COUNTY BUILDING  
COMMISSION  
BUILDING PERMIT APPLICATION

Improvement Location Permit # \_\_\_\_\_ (Copy Required)

Building Permit # \_\_\_\_\_ Type of permit \_\_\_\_\_ Date issued \_\_\_\_\_

Building Permit Fee \_\_\_\_\_ Date Paid \_\_\_\_\_

Zoning Classification \_\_\_\_\_

Footer Insp. Date \_\_\_\_\_ Frame Insp. Date \_\_\_\_\_ Final Insp. Date \_\_\_\_\_

Applicant Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Building Location (Address) \_\_\_\_\_ City \_\_\_\_\_ Twp. \_\_\_\_\_

Building Contractor \_\_\_\_\_ Phone # \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ Phone # \_\_\_\_\_

License # \_\_\_\_\_

Electrical Contractor \_\_\_\_\_ Phone # \_\_\_\_\_

Lot Dimensions / Acreage \_\_\_\_\_ Building Dimension \_\_\_\_\_

Total Floor Area \_\_\_\_\_

Electrical Service Panel Size \_\_\_\_\_

Proposed use of Building \_\_\_\_\_ Estimated Cost \_\_\_\_\_

Type of Heat \_\_\_\_\_

Rooms: Bedrooms \_\_\_\_\_ Kitchen \_\_\_\_\_ Livingroom \_\_\_\_\_ Bath \_\_\_\_\_

Family \_\_\_\_\_ Utility \_\_\_\_\_ Storage \_\_\_\_\_ Unimproved \_\_\_\_\_

Dining \_\_\_\_\_ Other \_\_\_\_\_

Type of Improvement: \_\_\_\_\_

Draw in Site Location Map

This Section For  
Mobile Home Use Only

Conditional use or other Permit received \_\_\_\_\_ Yes \_\_\_\_\_ (Copy Required)

Application & Fee Received by: \_\_\_\_\_

\_\_\_\_\_  
Building Department Secretary

\_\_\_\_\_  
Commissioner Assistant

\_\_\_\_\_  
Commissioner Secretary

Type of Structure: Masonry \_\_\_\_\_ Wood Frame \_\_\_\_\_ Log \_\_\_\_\_

Structural Steel \_\_\_\_\_ Reinforced Concrete \_\_\_\_\_

Earth sheltered \_\_\_\_\_ Mobile Home \_\_\_\_\_

Modular Home \_\_\_\_\_

Type of Foundation: Crawlspace \_\_\_\_\_ Basement \_\_\_\_\_ Concrete Slab \_\_\_\_\_

Wood \_\_\_\_\_ Other \_\_\_\_\_

Type of Water Supply: \_\_\_\_\_ Sewage: \_\_\_\_\_  
(Septic Tank or Public Sewage)

INSTRUCTIONSTO BUILDERS OR PERMIT HOLDERS:

- Inspection # 1 Call Inspection department (499-7791) request inspection before pouring footing (give 24 hr. notice)
- Inspection # 2 Call inspection department for rough inspection waterproofing-framing-roofing (rough-in electrical)
- Inspection # 3 Call inspection department for final inspection.

COVER NO WORK UNTIL INSPECTION PERFORMED

Locate structure on lot \_\_\_\_\_ North \_\_\_\_\_  
Show setback lines in \_\_\_\_\_  
Feet from all lines to \_\_\_\_\_  
Structures \_\_\_\_\_ West \_\_\_\_\_ East \_\_\_\_\_  
\_\_\_\_\_ South \_\_\_\_\_

I hereby certify that the information contained within is correct and true to the best of my knowledge. I agree to abide by all applicable laws of this jurisdiction and to inform the building commission if any changes are made affecting this application.

Signature of applicant \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_